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PATENT TRADEMARK OFFICE

NCI-061

#11

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Luis VALENTE  
Serial No.: 09/330,274

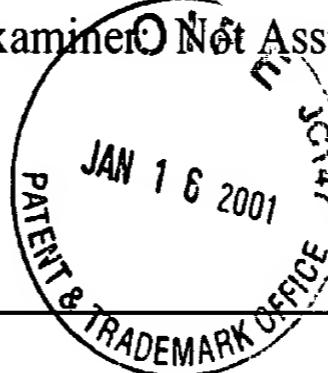
Filed: June 11, 1999

Group Art Unit: Not Assigned

Title: Hierarchical Open Security  
Information Delegation and  
Acquisition

Examiner: Not Assigned

Attorney Docket No.: NCI-061

Assistant Commissioner for Patents  
Washington, D.C. 20231INFORMATION DISCLOSURE STATEMENT

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Dear Sir:

JAN 19 2001

This Information Disclosure Statement is submitted:

Technology Center 2100

under 37 CFR 1.97(b), or  
(Within three months of filing national application; or date of entry of international application; or before mailing date of first office action on the merits; whichever occurs last)

under 37 CFR 1.97(c) together with either a:  
 Certification under 37 CFR 1.97(e), or  
 a \$180.00 fee under 37 CFR 1.17(p), or  
(After the CFR 1.97(b) time period, but before final action or notice of allowance, whichever occurs first)

under 37 CFR 1.97(d) together with a:  
 Certification under 37 CFR 1.97(e), and  
 a petition under 37 CFR 1.97(d)(2)(ii), and  
 a \$180.00 petition fee set forth in 37 CFR 1.17(i)(1).  
(Filed after final action or notice of allowance, whichever occurs first, but before payment of the issue fee)

Applicant(s) submit herewith Form PTO SB/08A-Information Disclosure Citation together with copies, of patents, publications or other information of which applicant(s) are aware, which applicant(s) believe(s) may be material to the examination of this application and for which there may be a duty to disclose in accordance with 37 CFR 1.56.

The relevance of the attached references is that this is the closest art of which Applicant is aware.

Applicant submits that the above references taken alone or in combination neither anticipate nor render obvious the present invention. Consideration of the foregoing in relation to this application is respectfully requested.

It is requested that the information disclosed herein be made of record in this application.

Respectfully submitted,

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner of Patents and Trademarks, Washington, D.C.

Date of Deposit: 1/10/2001

Typed Name: Arlette Malhas

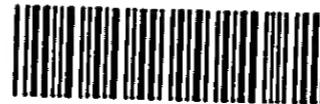
John C. Merchant

John C. Merchant  
Attorney/Agent for Applicant(s)  
Reg. No. 45,996

Date: 1/10/01

Signature: Arlette Malhas

Telephone No.: 650-947-0700 ext 309



22883

PATENT TRADEMARK OFFICE

PTO/SB/21 (12-97)

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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

4+

Application Number 09/330,274

Filing Date June 11, 1999

First Named Inventor Luis VALENTE

Group Art Unit Not Assigned

Examiner Name Not Assigned

Attorney Docket Number NCI-061

## ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Form SB/08A; cited art; Return Postcard
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
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## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	John C. Merchant	Reg. No. 45,996
Signature		
Date	January 16, 2001	

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: 

Typed or printed name	Arlette Malhas
Signature	
Date	January 16, 2001

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